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FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

209

OMB APPROVAL

OTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION (check if this is an amendment and name has changed, and indicate change.) Gaslight Lender LLC Units of Limited Liability Company Interests Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Gaslight Lender LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 111 East Wisconsin Avenue, Suite 1700, Milwaukee, WI 53202 (414) 347-3600 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Same Same Brief Description of Business To enter into a loan agreement Type of Business Organization corporation limited partnership, already formed other (please specify): limited liability company limited partnership, to be formed business trust Actual or Estimated Date of Incorporation or Organization: Month Year Actual Estimates 2005 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdictions) **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Partner an/or Manager Full Name (Last name first, if individual) Mandel, Barry R. Business or Residence Address (Number and Street, City, State, Zip Code) 111 East Wisconsin Avenue, Suite 1700, Milwaukee, WI 53202 ☐ General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В. І	NFORMA	TION AB	OUT OFF	ERING				
1.	Has the	issuer so	ld, or does	the issuer in	tend to sell,	to non-accre	dited invest	ors in this of	fering?			Yes	No ⊠
	Answer	r also in A	Appendix, C	olumn 2, if	filing under	ULOE.							
2.				ment that w		ed from any	individual?					\$ <u>100,</u> 0	000*
3.	•		_			unit?	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Yes ⊠	No
4.	indirect sales of or deale If more	tly, any confisecurities of securities of the securities of the securities of the security of	ommission of s in the offered with the (5) person	or similar re cring. If a pe SEC and/or	muneration erson to be line with a state of are associated	for solicitation isted is an as e or states, liked persons	on of purchasociated per st the name	aid or given, asers in conn son or agent of the broke oker or deale	ection with of a broker or or dealer.				
Ful N/A		Last name	e first, if inc	lividual)									
Bus	siness or	Residence	e Address (Number and	Street, City	, State, Zip (Code)						
Nai	me of As	sociated I	Broker or D	ealer									
Sta	tes in Wh	nich Perso	n Listed Ha	as Solicited	or Intends to	Solicit Purc	hasers					·	
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Ful	l Name (Last name	e first, if inc	dividual)									•
Bus	siness or	Residence	e Address (Number and	Street, City	, State, Zip (Code)						-
Nai	me of As	sociated I	Broker or D	ealer					· · · · · · · · · · · · · · · · · · ·	<u>-</u> -			
Sta	tes in Wh	nich Perso	on Listed Ha	as Solicited	or Intends to	Solicit Purc	hasers						
(C	heck "Al	ll States"	or check in	dividual Stat	es)			•••••					☐ All States
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Ful	l Name (Last name	e first, if inc	dividual)	<u> </u>								<u></u>
Bus	siness or	Residence	e Address (Number and	Street, City	, State, Zip (Code)						
Nai	me of As	sociated I	Broker or D	ealer	- '	•				······································			
Sta	tes in Wh	nich Perso	n Listed H	as Solicited	or Intends to	Solicit Purc	hasers						
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING TRICE, NUMBER OF INVESTORS, EAFENSES AND	USE OF PROCEEDS	,
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$0	\$0
	Common Preferred	<u> </u>	97.
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0	\$0
	Other (Specify) Units of limited liability company interests	\$3,070,000	\$3,070,000
	Total	\$3,070,000	\$3,070,000
		30,070,000	<u> </u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	_10_	\$3,070,000
	Non-accredited Investors	0	\$0 ·
	Total (for filings under Rule 504 only)	N/A	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
		Type of Security	Dollar Amount
	Type of Offering		Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A	\$ N/A
	Rule 504	N/A	\$ N/A
	Total	N/A	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees		\$0
	Accounting Fees	<u> </u>	\$0
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$0

Total

Other Expenses (identify)

<u>\$0</u>

<u>\$0*</u>

^{*}Offering expenses were paid by an affiliate of the Manager.

	b. Enter the difference between the aggregate offering price given in response to Part C Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."				\$ <u>3,0</u>	\$3,070,000	
1 6	used for each of the purposes shown. If the estimate and check the box to the left of the stimulation of the left of the stimulation of the stimul	If gross proceeds to the issuer used or proposed the amount for any purpose is not known, furnis the estimate. The total of the payments listed m assuer set forth in response to Part C - Question	sh an nust				
				Payments to Officers, Directors, & Affiliates		Payments To Others	
S	alaries and fees			\$0		\$0	
P	urchase of real estate			\$0	_ 🗆	\$0	
P	urchase, rental or leasing and installation	of machinery and equipment		\$0	_ 🗆	<u>\$0</u>	
C	onstruction or leasing of plant buildings	and facilities		\$0		\$0	
O	equisition of other businesses (including affering that may be used in exchange for	the assets or securities of another	<u></u>	¢0		¢0	
	- ·			<u>\$0</u>	_	\$0	
	, ,			<u>\$0</u>	- 📙	\$0	
	.			\$0	_ U	\$0	
U	•						
_				\$3,070,000		\$0	
C	olumn Totals			\$3,070,000	_ 🗆	<u>\$0</u>	
T	otal Payments Listed (column totals adde		\$ <u>3,070,000</u>				
		D. FEDERAL SIGNATURE					
itutes		by the undersigned duly authorized person. If o the U.S. Securities and Exchange Commission					
	nt or Type) Lender LLC	Signature PRIL	l	Date		1/05	
	igner (Print or Type)	Title of Signer (Print or Type)					
01.8		Manager					